

L15000120107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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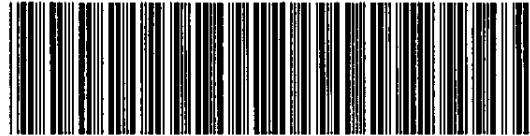
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

JAN 04 2016

J. SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OWEN LARUE, LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALAN L. BRUCE

(Name of Person)

(Firm/Company)

9723 SW 52ND CT

(Address)

OCALA, FL 34476

(City/State and Zip Code)

For further information concerning this matter, please call:

ALAN BRUCE

(Name of Person)

at (352) 237-2283

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
OWEN LARUE, LLC

2. The Articles of Organization were filed on July 13, 2015 and assigned
document number L15000120104

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The LLC was set up in anticipation of purchasing a particular small business which was undergoing review.

Subsequently, the decision was made not to purchase the business. The LLC never began business operations

and no further business ventures are being considered.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Alan L. Bruce

9723 SW 52nd Ct

Ocala, FL 34476

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:


Signature

Alan L. Bruce
Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA